

COMMONWEALTH OF VIRGINIA

08-CV-3862

SERVICE OTHER THAN BY VIRGINIA SHERIFF CASE NO: _____

UNITED STATES DISTRICT COURT, SOUTHERN DISTRICT OF NEW YORK COURT

ALEA NORTH AMERICA COMPANY, ET AL vrs. RALEIGH T WRIGHT

RALEIGH T WRIGHT, 879 PINE STREET, DANVILLE, VA 24541

is the name and address of the person upon whom service of the following is to be made.

- | | |
|---|--|
| <input type="checkbox"/> Notice of Motion for Judgment and Motion for Judgment | <input type="checkbox"/> Warrant in Debt |
| <input type="checkbox"/> Subpoena in Chancery and Bill of Complaint | <input type="checkbox"/> Summons for Unlawful Detainer |
| <input type="checkbox"/> Subpoena Duces Tecum | <input type="checkbox"/> Witness Subpoena |
| <input type="checkbox"/> Garnishment Summons | <input type="checkbox"/> Notice of Deposition |
| <input type="checkbox"/> Copy mailed to judgment debtor on date below after serving the garnishee unless a different date is shown below. | |

☒ Other: SUMMONS AND COMPLAINT - RULE 7.1 STATEMENT - THE ASSIGNED JUDGES RULES - USDC / SDNY INSTRUCTIONS PROCEDURES FOR FILING AN ELECTRONIC CASE

I, the undersigned swear/affirm that I am a private process server, I am not a party to, or otherwise interested in the subject matter in controversy in this case, I am 18 years of age or older, and I served as shown below, the above named person upon whom service of process was to be made with copies described above.

- Date and time of service: 5/10/08 AT 10:00 AM- Place of service: RALEIGH T WRIGHT, 879 PINE STREET, DANVILLE, VA 24541

- METHOD OF SERVICE:

☒ PERSONAL SERVICE

Being unable to make personal service, a copy was delivered in the following manner:

☐ Delivered to person found in charge of usual place of business or employment during business hours and giving information of its purport. Service accepted by: _____

☐ Delivered to family member (not temporary sojourner or guest) age 16 or older of party named above after giving information of its purport. List name, age of recipient, and relationship of recipient to party named above.

☐ Posted on front door or such other door as appears to be the main entrance of usual place of abode, address listed above. (Other authorized recipient not found.)

☐ Served on Secretary of the Commonwealth

☐ Not found _____

Date: 5/10/08

Signature

Name (Print or Type): ROBERT L HESTER

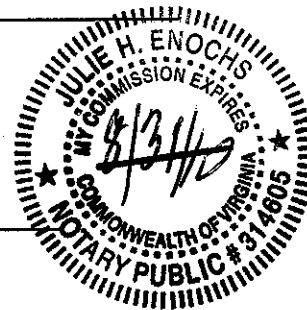
COVAPPS CERTIFICATION NO.: _____

COMMONWEALTH OF VIRGINIA

COUNTY OF

AMHERSTSubscribed and sworn to/affirmed before me this day by ROBERT L HESTERDate: 8/10/0

Signature of Notary Public

My commission expires: 8/31/10 REG # 314605

HESTER AND ASSOCIATES, 400 HILLTOP DR, MADISON HGTS., VA 24572 PH 434 845 0628